

Delivery Systems under Healthcare Reform

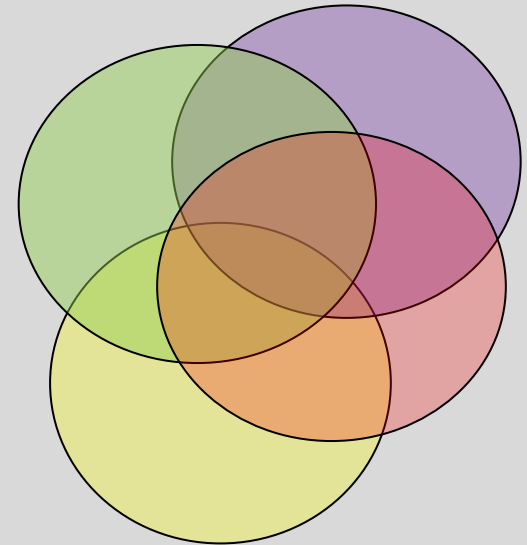
Indiana Council

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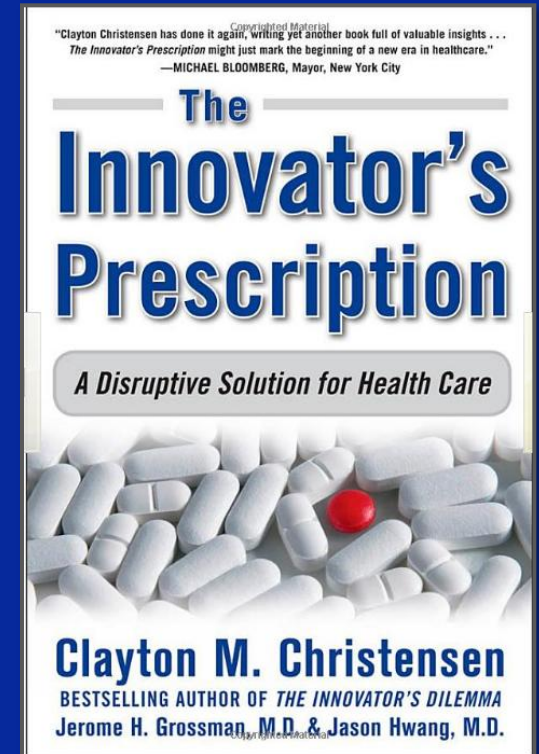
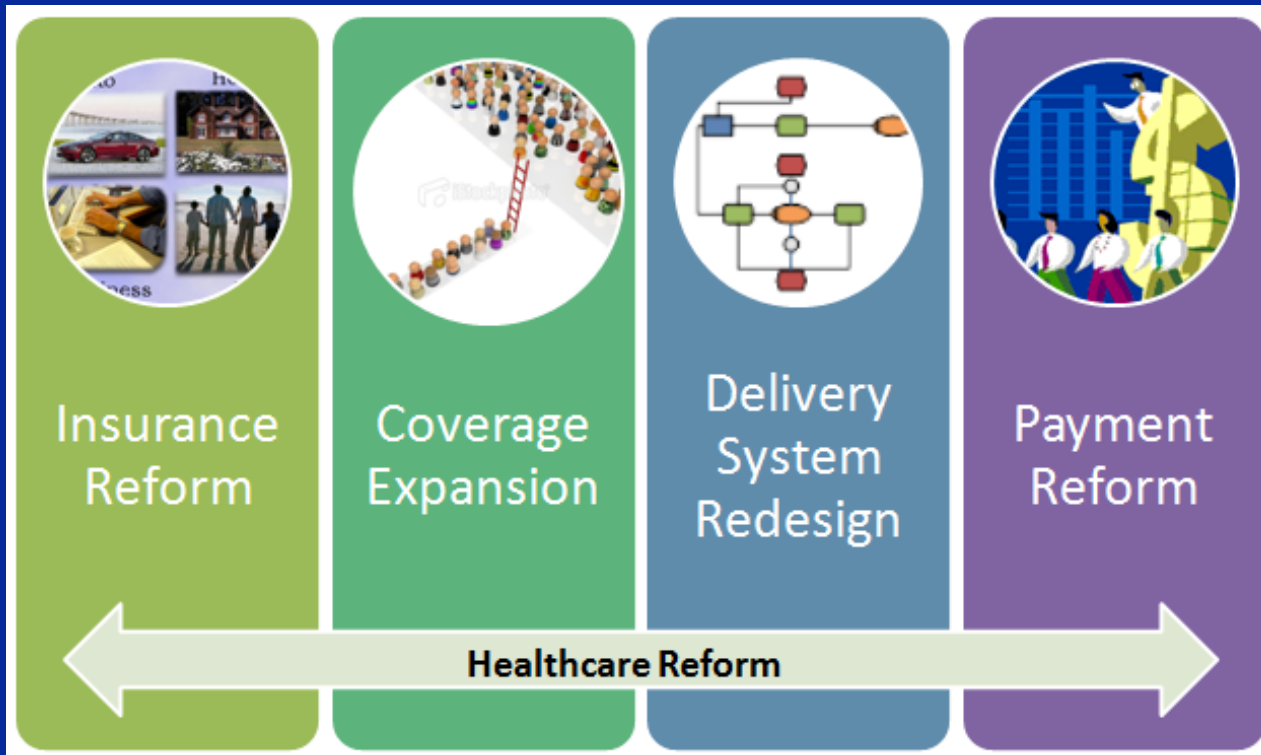
Leadership Approach

I. How does a CMHC deal with an external environment that is changing dramatically with little certainty on when and how changes will occur and what will be funded?

- Wait until substantial funding is available.
- Do a few things exceeding well.
- Work on many small projects:
 - to train staff
 - to shift organizational mindset, and
 - to see what works.

Two Major Drivers of Change

- 1) The Affordable Care Act (government as an accelerant)
- 2) Disruptive Innovation in the US Healthcare System (market forces)



Congressional Outlook: Fall 2013



Integrated Health Projects

- > **Unity Health Partners onsite clinics**
- > **BeWell Primary Care Wrap Around (SAMSHA)**
- > **Johnson Nichols Rural Health Clinics**
 - ISALUS – New Electronic Medical Record
 - New blended facility in Owen County – \$400,000 grant
- > **Improving Physical Health of Clients**
 - Health Navigator training for adult/youth case managers
 - Graphic Display of Wellness indicators
- > **FQHC/RHC Bi-Directional Integration**
 - CSI therapists placed at 4 FQHCs and RHCs
- > **Data Management/Youth Health Navigator**
 - MDWise JIVA claims data
 - Tracking HEDIS Measures

Integrated Health Projects

> Hospital Engagement Projects

- HealthLINC HIE, ADT Alerts from Bloomington Hospital
- Lean Sigma project at Columbus Regional Hospital

> Telehealth

- Expansion of tele-psychiatry capabilities to 9 locations
- Beginning work on primary care

> Electronic Recovery Engagement Center (SAMSHA)

> Collaboration and Advocacy

> Miscellaneous

- Client exercise/nutrition training at on-site staff gym
- Participating in Chantix study on smoking cessation
- Hepatitis C grant from IU School of Public Health
- Collaboration with HealthLINC on medication adherence

Providing Primary Care

II. It is important for a CMHC to have onsite physical health care; however, it is almost impossible to provide directly without a loss. What course should a CMHC follow?

- Become an FQHC or own RHCs.
- Negotiate with another provider to supply the primary care at your site.
- Provide directly and bill OMPP & MCOs.

Providing Primary Care

Several centers have FQHCs providing onsite primary care.

One center has become an FQHC look-alike, while several others are applying.

Indiana Medicaid pays 60% of Medicare rates for physical health care.

Providing Primary Care

Primary and Behavioral Health Care Integration Grants (PBHCI)

Centers that have had grants for 2 or 3 years:

Adult & Child
Midtown

Centerstone
Regional

2 new grants have been awarded for 5 centers:

Community

Aspire

Porter-Starke

Oaklawn

Swanson

Case to Care Management

III. CMHCs potentially have a unique and vast community health coaching resource – our case management staff. How do we alter their role to become health coaches?

- Train staff on key illnesses and shift mindset.
- Develop a measurement tool to track staff and client changes.
- Train all case managers or develop specialists.

Realigning Health with Care Stanford Social Innovation Review Summer 2012

http://www.ssireview.org/articles/entry/realigning_health_with_care

Health Coach Job Functions

- Provide resources to help individuals understand their physical illness.
- Support adherence to treatment for chronic physical illness.
- Assist in modifying lifestyle by improving nutrition and increasing exercise.



Flowsheet: TESTPATIENT, TESTY [DOB: 11/01/1996] (ID=29841)

Graphs are currently set to show over the data set. Click [here](#) to change this.

Metabolic Risk Factors

Activities of Daily Living

	Blood Pressure mmHg	Heart Rate bpm	Weight lbs	Height in	BMI kg/m ²	Waist circ. in	Cigarette Use #/day	Body Fat %	author
9/14/2010	138/96	92	183	67	34.1	41	30		AL
10/12/2010	130/90	88	178	67		40	25		AL
11/16/2010	126/84	82	179	67		38	20		AL
12/14/2010	122/78	80	170	67		35	10		AL
1/21/2011	/	72	162			34	7		PR, AL
1/22/2011	122/76	66	160				7		PR, AL
3/21/2011	120/72	68	152	67	25.3	33	0	5	PR, PR
7/10/2012	<input type="text"/> / <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	submit

Click on a header to view a progress graph for that aspect.

Double-click an entered value or an empty cell to modify it.

To submit a new entry, enter data in the boxes above and click submit at the right end.



Health Data

IV. How do CMHCs obtain needed data to change client behaviors and improve health outcomes?

- Work with MCOs and OMPP to provide claims data.
- Work with health information exchanges to provide hospital admission data, ER usage, etc.
- Track change data inside our own systems.

MDWise JIVA

(Note: This is a Test Site. Data entered here will not be migrated to Production)

Help Legends Dashboard Memory List User: Test, Tammy

Jiva™

Nurse

WorkList Episode Intake Manage Episodes Call Tracking Provider

Demographics

Name: [Mouse, Mickey](#) DOB(Age): 01/01/2009 (4) Address: - Client(TPA): Select Health Product Type: Medicaid (Medicaid Program of MI)

Sex: - Employer: Select Health Effective Date: 01/01/2007

Member ID: [123456789](#) E-mail: Phone: Group Name: [HIP-Select Health](#) Term Date:

Member

Episode

Group Ungroup Program

-(CM) - 06/17/2013
-Diabetes m... (IP) - 07/10/2013
-(CM) - 06/18/2013
-Diabetes m... (OP) - 04/10/2013
-Diabetes m... (OP) - 04/08/2013
-Diabetes m... (BH-OP) - 04/08/2013
-Depressive... (BH-OP) - 12/17/2012

Add Episode Documents Notes Correspondence Assessment Summary Activities Add Call Plan Of Care

Keyword More ...

Gaps In Care

No Gaps in Care Found

Medications

Name	Source	Qty.	Fill Date
SODIUM CHLORIDE	Claims Data		

Medical History

No data currently exists.

Activity (3)

Date	Activity
06/18/2013 10:33 AM	Assess and encoura...
06/24/2013 11:55 AM	Initial Assessment...
07/10/2013 10:22	Discharge Planning

Problem

Problem	Category	Date
Activity Intole...	Education	06/18/2013
Nutrition: Alte...	GERD	06/17/2013
Self Management	Cancer	06/17/2013

Lab Data

No lab data found.

Missouri Hospital Admission E-mails

- ☐ CMHCs receive daily e-mails regarding enrollees who have been authorized by Medicaid for admission to a hospital
- ☐ CMHCs are responsible for
 - Contacting the hospital to participate in discharge planning
 - Contacting the individual within 72 hours of discharge
 - Completing a medication reconciliation

Collaboration & Grants

V. Should my CMHC collaborate or go it alone?

- Look for every opportunity to collaborate and obtain grants/other funding opportunities, small and large.
- Collaborate with MCOs, ACOs, FQHCs, CMHCs, hospitals, physician practices, etc.



Centerstone

Creating a **Partnership** that
Accelerates **Integrated Care**

Spencer Integrated Health Clinic

Seamlessly Blending Behavioral and Physical Health Care



Behavioral Health Homes

VI. When should our Indiana CMHCs start the process of becoming behavioral health homes?

- When the SPA passes.
- When ample funding is available.
- Now, on an incremental basis.

It Takes Time

- Be Patient
- Get Ready: Be Clear About Your Vision
- Take Time
 - To prepare your organization
 - To design, implement and improve your processes
 - To build teams and trust
- Swallow Your Pride: Ask for help



The CATIE Study

At baseline investigators found that:

88.0% of subjects who had dyslipidemia

62.4% of subjects who had hypertension

30.2% of subjects who had diabetes

were NOT receiving treatment.

Joseph Parks, M.D., National Council, 4/14/12

Learning to Use the Data Collection and Reporting System



Delivery Systems

The Other Side of Innovation: Solving the Execution Challenge

Vijay Govindarajan and Chris Trimble

"Of all the forms of inequality, injustice in health care is the most shocking and inhumane." Martin Luther King Jr.